

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|----------------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 25 | 07 23 03 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | PL | | 8/31/03 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral).... Canceled A Appeal
 ÷ Restricted 0 Objected

| Claim | Date |
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| Final | |
| Original | 8/5/03 |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
stamp additional sheet here